

03/28/06

Form PTO-436A
(Rev. 5/98)

9/675902

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>JD</i>	<i>75334</i>	
O.I.P.E. CLASSIFIER		<i>12</i>	<i>10/11</i>
FORMALITY REVIEW	<i>FH</i>	<i>JC 856</i>	<i>12-08-00</i>
RESPONSE FORMALITY REVIEW	<i>int</i>	<i>571</i>	<i>04/10/01</i>

INDEX OF CLAIMS

.....	Rejected	N	Non-elected
.....	Allowed	I	Interference
(Through numeral).....	Canceled	A	Appeal
.....	Restricted	O	Objected

Claim	Final	Original	Date
1	✓	✓	
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
8	✓	✓	
9	✓	✓	
10	✓	✓	
11	✓	✓	
12	✓	✓	
13	✓	✓	
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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